

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 U.S. Travel Association PAC

ADDRESS (number and street) 1100 New York Avenue Suite 450W Washington DC 20005 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00457754 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20 (M2) [X], Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 01 / 01 / 2018 through 01 / 31 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mimm, David, , , Type or Print Name of Treasurer

Signature of Treasurer Mimm, David, , , [Electronically Filed] Date 03 / 19 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**U.S. Travel Association PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		<input type="text" value="207641.49"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="207641.49"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="10619.50"/>	<input type="text" value="10619.50"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="218260.99"/>	<input type="text" value="218260.99"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="43024.50"/>	<input type="text" value="43024.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="175236.49"/>	<input type="text" value="175236.49"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

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Page 3

Write or Type Committee Name

**U.S. Travel Association PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4121.66	4121.66
(ii) Unitemized .....	1497.84	1497.84
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5619.50	5619.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	10619.50	10619.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	10619.50	10619.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10619.50	10619.50

**DETAILED SUMMARY PAGE**

of Disbursements

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	39.50	39.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	39.50	39.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	43000.00	43000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	- 15.00	- 15.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	- 15.00	- 15.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	43024.50	43024.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	43024.50	43024.50

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	10619.50	10619.50
34. Total Contribution Refunds (from Line 28(d)) .....	- 15.00	- 15.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10634.50	10634.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	39.50	39.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	39.50	39.50

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

**A. Dominguez, Mike, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5640 Shadow Bend Dr  
 City Las Vegas State NV Zip Code 89135-1225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MGM Resorts International Occupation (for Individual) Chief Sales Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3480.00

Date of Receipt 01 / 04 / 2018  
**Transaction ID : A0DB611A49CC441EF970**  
 Amount of Each Receipt this Period 3480.00  
 Memo Item

**B. Oster, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1922 Eamons Way  
 City Annapolis State MD Zip Code 21401-3196  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Executive Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.33

Date of Receipt 01 / 15 / 2018  
**Transaction ID : A1CC432737C54405FBE8**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**C. Kaler, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 146 Bryant St  
 City Buffalo State NY Zip Code 14222-2003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Visit Buffalo Niagara Occupation (for Individual) President & Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 01 / 29 / 2018  
**Transaction ID : A89105D0BCD9F47C0A10**  
 Amount of Each Receipt this Period 225.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3913.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 14  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Oster, Gary, , ,

Mailing Address 1922 Eamons Way

City Annapolis	State MD	Zip Code 21401-3196
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) U.S. Travel Association	Occupation (for Individual) Executive Vice President
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.66

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		30		2018

**Transaction ID : ABDFFC85BC244492DA20**

Amount of Each Receipt this Period  
208.33

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	208.33
<b>TOTAL</b> This Period (last page this line number only).....	4121.66

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**WYNDHAM WORLDWIDE CORP. PAC**

Mailing Address 22 SYLVAN WAY

City PARSIPPANY	State NJ	Zip Code 07054
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00424374

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	16	/	2018

**Transaction ID : A31C7793A4D184AFE5D**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	5000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)  
**A. CONAWAY FOR CONGRESS**

Mailing Address 110 West Louisiana Avenue  
Suite 312

City Midland State TX Zip Code 79701-3414

Purpose of Disbursement  
Political Contribution

Candidate Name  
**Conaway, Mike, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify)   
State: TX District: 11

Date of Disbursement  
MM / DD / YYYY  
01 / 18 / 2018

FEC Identification Number  
**C00383828**  
**Transaction ID : B993220E8B**  
Amount of Each Disbursement this Period  
2000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE**

Mailing Address 120 MARYLAND AVE NE

City Washington State DC Zip Code 20002-5610

Purpose of Disbursement  
Political Contribution

Candidate Name  
**DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) Other

Date of Disbursement  
MM / DD / YYYY  
01 / 18 / 2018

FEC Identification Number  
**C00042366**  
**Transaction ID : B4C8A11763**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. DEVIN NUNES CAMPAIGN COMMITTEE**

Mailing Address 217 3rd St. SE

City Washington State DC Zip Code 20003-1904

Purpose of Disbursement  
Political Contribution

Candidate Name  
**Nunes, Devin, G., ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify)

Date of Disbursement  
MM / DD / YYYY  
01 / 18 / 2018

FEC Identification Number  
**C00370056**  
**Transaction ID : BF6ED7059E**  
Amount of Each Disbursement this Period  
3000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

10000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial) <b>A. DR. RAUL RUIZ FOR CONGRESS</b>			Date of Disbursement MM / DD / YYYY 01 / 18 / 2018	
Mailing Address PO Box 15096			FEC Identification Number C00502575 <b>Transaction ID : B2BC924269I</b> Amount of Each Disbursement this Period 2500.00	
City Washington	State DC	Zip Code 20003-0096	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Political Contribution		Category/ Type 011		
Candidate Name <b>Ruiz, Raul, , ,</b>				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CA District: 36				

Full Name (Last, First, Middle Initial) <b>B. DR. RAUL RUIZ FOR CONGRESS</b>			Date of Disbursement MM / DD / YYYY 01 / 18 / 2018	
Mailing Address PO Box 15096			FEC Identification Number C00502575 <b>Transaction ID : BB7CA6D1E#</b> Amount of Each Disbursement this Period - 2500.00	
City Washington	State DC	Zip Code 20003-0096	Memo Item <input type="checkbox"/>	
Purpose of Disbursement VOID - Political Contribution Made on 11-6-17 (Lost in Transit)		Category/ Type 011		
Candidate Name <b>Ruiz, Raul, , ,</b>				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CA District: 36				

Full Name (Last, First, Middle Initial) <b>C. GRAVES FOR CONGRESS</b>			Date of Disbursement MM / DD / YYYY 01 / 18 / 2018	
Mailing Address 2345 GRAND BLVD STE 2200			FEC Identification Number C00359034 <b>Transaction ID : B5817FF8C5</b> Amount of Each Disbursement this Period 1000.00	
City Kansas City	State MO	Zip Code 64108-2618	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Political Contribution		Category/ Type 011		
Candidate Name <b>Graves, Sam, B., , Jr.</b>				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: MO District: 06				

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)  
**A. National Republican Senatorial Committee**

Mailing Address **425 SECOND STREET NE**

City **WASHINGTON** State **DC** Zip Code **20002**

Purpose of Disbursement  
Political Contribution

Candidate Name  
**National Republican Senatorial Committee**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  
 Other (specify) **011** Other

State: District:

Date of Disbursement  
MM / DD / YYYY  
**01 / 18 / 2018**

FEC Identification Number  
**C00027466**  
**Transaction ID : B647F6EA62I**  
Amount of Each Disbursement this Period  
**5000.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. PROJECT WEST POLITICAL ACTION COMMITTEE**

Mailing Address **1020 N Fairfax St Ste 201**

City **Alexandria** State **VA** Zip Code **22314-1537**

Purpose of Disbursement  
Political Contribution

Candidate Name  
**PROJECT WEST POLITICAL ACTION COMMITTEE**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  
 Other (specify) **011** Other

State: District:

Date of Disbursement  
MM / DD / YYYY  
**01 / 18 / 2018**

FEC Identification Number  
**C00525543**  
**Transaction ID : BBC9C66CAC**  
Amount of Each Disbursement this Period  
**5000.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. RELY ON YOUR BELIEFS FUND**

Mailing Address **One Constitution Ave NE Suite 300**

City **Washington** State **DC** Zip Code **20002-5618**

Purpose of Disbursement  
Political Contribution

Candidate Name  
**RELY ON YOUR BELIEFS FUND**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  
 Other (specify) **011** Other

State: District:

Date of Disbursement  
MM / DD / YYYY  
**01 / 18 / 2018**

FEC Identification Number  
**C00344648**  
**Transaction ID : B6828E3A4D**  
Amount of Each Disbursement this Period  
**5000.00**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ **15000.00**

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)

**A. STIVERS FOR CONGRESS**

Mailing Address 217 3rd St. SE

City  
Washington

State  
DC

Zip Code  
20003-1904

Purpose of Disbursement  
Political Contribution

011

Category/  
Type

Candidate Name

**Stivers, Steve, E., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: OH District: 15

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	1	8

FEC Identification Number

**C** C00441352

**Transaction ID : B07C8F6810f**

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. VALADAO FOR CONGRESS**

Mailing Address 2308 Mount Vernon Avenue  
#337

City  
Alexandria

State  
VA

Zip Code  
22301-1328

Purpose of Disbursement  
Political Contribution

011

Category/  
Type

Candidate Name

**Valadao, David, G., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: CA District: 21

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	1	8

FEC Identification Number

**C** C00499392

**Transaction ID : BDDE372CE6**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. YODER FOR CONGRESS, INC**

Mailing Address 3410 Alabama Avenue

City  
Alexandria

State  
VA

Zip Code  
22305-1736

Purpose of Disbursement  
Political Contribution

011

Category/  
Type

Candidate Name

**Yoder, Kevin, W., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: KS District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	1	8

FEC Identification Number

**C** C00472365

**Transaction ID : BEFDAE5B8**

Amount of Each Disbursement this Period

500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4	5	0	0	.	0	0
4	5	0	0	.	0	0

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF DICK DURBIN**

Mailing Address 200 East Jefferson Street

City Falls Church State VA Zip Code 22046-3531

Purpose of Disbursement  
VOID - Political Contribution Made on 10-23-17 (Returned)

Category/  
Type

Candidate Name  
**Durbin, Dick, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: IL District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
01 / 30 / 2018

FEC Identification Number  
**C** C00148999  
**Transaction ID : BBF30EF784:**  
Amount of Each Disbursement this Period  
- 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
Political Contribution

Category/  
Type

Candidate Name  
**NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) Other

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
01 / 30 / 2018

FEC Identification Number  
**C** C00075820  
**Transaction ID : B1B6355FEC:**  
Amount of Each Disbursement this Period  
15000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

FEC Identification Number  
**C**  
Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

12500.00  
43000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)

**A. Hansen, Erik, , ,**

Mailing Address 1125 11th St NW  
Apt 603

City  
Washington

State  
DC

Zip Code  
20001-6425

Purpose of Disbursement  
Void of 3/6/17 Refund Check

010

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	2		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : BEEA7571DE

Amount of Each Disbursement this Period

[ ] - 15.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[ ]

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[ ]

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[ ] - 15.00

[ ] - 15.00